This Form is for INTERNAL PT USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:	091	361610	
•	$\neg \neg$		

FORM OPE-RAM-01 (Rev. 12/97)

Total Fee Calculation

	Fee Cade	Total # Claims	Number Extra	X	Fee	Fe: -	Total
	Sm∕Lg.				Sm. Eatity	Lg. Eating	•
Basic Filing Fee	201/101			•			760
Total Claims >20	203/103	-20 =		x			
Ladepeadeat Claims >3	202/102	<u>D</u> .1-		x			
Mult Dep Claim Present	204/104						
Surcharge	205/105					—	1365
English Translation	139						.130
TOTAL FEE CALCULA	אסוד.						(020)
Fees due upon filing t	ae application:						
Total Filing Fees Due	= s <u>l</u>	020		_	٠		
Less Filing Fees Subm	itted - S	6		_			•
BALANCE DUE	· = 2	1020.		_			
Sm C Office of Initial Patent	Examination						

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998 0 ایا ا ه **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE [**SMALL ENTITY** FOR **NUMBER EXTRA NUMBER FILED** RATE FEE RATE FEE **BASIC FEE** 380.00 760.00 OR minus 20= **TOTAL CLAIMS** 0 X\$ 9= X\$18= OR P INDEPENDENT CLAIMS minus 3 = X39= X78= OR MULTIPLE DEPENDENT CLAIM PRÉSENT +130= +260= OR * If the difference in column 1 is less than zero, enter "0" in column 2 7しり **TOTAL** OR TOTAL **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY SMALL ENTITY** OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL RATE TIONAL RATE **AFTER PREVIOUSLY EXTRA** AMENDMENT PAID FOR **FEE** FEE Total Minus X\$18= X\$ 9= OR Independent Minus X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT RATE** TIONAL TIONAL **RATE AFTER PREVIOUSLY EXTRA AMENDMENT** PAID FOR **FEE** FEE Total Minus X\$ 9= X\$18= OR Independent Minus *** X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING **NUMBER PRESENT PREVIOUSLY** RATE TIONAL **RATE AFTER** TIONAL **EXTRA** FEE FEE

AMENDMENT AMENDMENT **PAID FOR** Total Minus Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

AMENDMENT

AMENDMENT

OR

OR

OR

X\$18=

X78=

+260=

TOTAL

X\$ 9=

X39=

+130=

ADDIT. FEE

TOTAL